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Bib Data Sheet

CONFIRMATION NO. 6522

<b>SERIAL NUMBER</b> 10/644,552	<b>FILING OR 371(c) DATE</b> 08/19/2003 <b>RULE</b>	<b>CLASS</b> 002	<b>GROUP ART UNIT</b> 3765	<b>ATTORNEY DOCKET NO.</b> 102121.00014
<b>APPLICANTS</b> Sandra Leigh Hatfield, Lighthouse Point, FL; Ronda Renee Graves, Coconut Creek, FL; Wayne Kolbeck, Boynton Beach, FL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/404,435 08/19/2002 <i>TB</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>- None - TB</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 5
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 54975				
<b>TITLE</b> ADJUSTABLE CONCEALED BODY ARMOR				
<b>FILING FEE RECEIVED</b> 1220	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	